

PROBATE COURT OF _____ COUNTY, OHIO

IN THE MATTER OF THE ADOPTION OF _____
 (Name after adoption)

CASE NO. _____

PETITIONER'S ACCOUNT

(R.C. 3107.10)

☐ **PRELIMINARY ESTIMATE ACCOUNTING**
 (To be filed not later than date petition filed)

☐ **FINAL ACCOUNTING**
 (To be filed not later than 10 days
 prior to date of final hearing)

This accounting specifies all disbursements of anything of value the petitioner, a person on the petitioner's behalf, and the agency or attorney made and have agreed to make in connection with the minor's permanent surrender under division (B) of Section 5103.15 of the Revised Code, placement under Section 5103.16 of the Revised Code, and adoption under Chapter 3107. (Attach extra sheets if necessary)

DATE	NAME AND ADDRESS	DISBURSEMENTS MADE OR AGREED TO BE MADE	ACTUAL COSTS
	PHYSICIAN		
	HOSPITAL/MEDICAL FACILITY		
	ATTORNEY		
	ACTUAL COST TO THE ATTORNEY		
	AGENCY		
	ACTUAL COST TO THE AGENCY		
	MAINTENANCE AND MEDICAL CARE REQUIRED UNDER R.C. 5103.15		
	FOSTER CARE		
	GUARDIAN AD LITEM		
	COURT COSTS		
	ALL OTHER DISBURSEMENTS		
	TOTAL		

CASE NO. _____

[Reverse of Form 18.9]

CERTIFICATION OF PETITIONER'S ACCOUNT

The undersigned certifies this _____ day of _____, that this accounting is true and accurate.

Attorney or Agency

Typed or Printed Name

Address

City

State

Telephone Number (include area code)

The petitioner has reviewed this accounting and attests to its accuracy this ____ day of _____

Petitioner

Petitioner